SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

**Bayfield County** Planning and Zoning Depart.

PO Box 58 Washburn, WI 54891 (715) 373-6138

**APPLICATION FOR PERMIT** BAYFIELD COUNTY, WISCONSIN

> Date Stamp (Received) MAY 18 2018

ENTERED Bayfield Co. Zoning Dept INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Permit #: **Amount Paid:** Refund:

Sanitary # 5662 (1980)

TYPE OF PERMIT R	EQUES	TED-	A LANI	DUSE   SAI	NITARY	PRIVY	□ со	NDITIONA	L USE	SPEC	CIAL USE	☐ B.O.	A. 🗆	OTHER	
Owner's Name:		^	1		Mailing Ad				State/Zip:			3.3.	Telephoi	ne:	
Steve Leatblad 34345 50 County Howy						T - 1 .				46111					
Address of Property: City/State/Zip:						wige	1711-1/4 1047-1619 012 3 4814					Cell Phone:			
								715-292-004							
34345 50 County How J Ray field W. Contractor Phone: Plumber							39814								
Contractor: Contractor Phon							Phone: Plumber:						Plumber	Phone:	
Authorized Agent: (6	Serson Sig	ning Appli	cation on behal	f of Owner(s)	Agent Pho	no:	Agon	t Mailing Ad	dross (inclu	do City/	State /7in).		Mritton	Authorization	
Authorized Agent: (Person Signing Application on behalf of Owner(s))						Agent Phone: Agent Mailing Address (include City/State/							Zip): Written Authorization Attached		
					ToulP#							☐ Yes ☐ No			
PROJECT	Legal	Descrin	tion: (Use T	ax Statement)	Tax ID#			Rec				corded Document: (i.e. Property Own			
LOCATION						876		- \$1				tevers beatland			
NE 1/4,	WIN	1/4	Gov't	Lot Lot(s)	CSM	Vol & Pag	ge Lot(s) No. Block(s) No. Si				Subdivis	Subdivision:			
	14.00	/-													
Section 27, Township 50 N, Range 04					10/	Town of:	1	Lot			Lot Size	ot Size		Acreage	
Section	<i></i> ,	ownsnip	, <u></u>	v, nange <u>U</u>	_ vv	Bay Fre		eld						18	
	П	Drowst	/I and!!! *	200 fact -f D'	OH C+				ahuw- !- f	CI	uallic -				
	☐ Is Property/Land within Creek or Landward side o			of Floodplain? If ye		yescontinue —>		Distance Structure is from Shoreline			reline : feet		perty in	Are Wetland	
☐ Shoreland →												1	in Zone?	Present?	
											reline : feet			☐ Yes ➢ No	
ent co					yes	- Indiana					reet			\	
Non-Shoreland															
Value at Time								TO LINE					na de la		
of Completion								# of			What Ty	pe of		Type o	
* include		Proje	ct	# of Storie	es F	Foundation		bedrooms				ary Syster	n	Water	
donated time &								in tructure			on the p			on	
material		1.00				للمالك								propert	
			ruction	1-Story	1-Story 🗆 Ba			1	☐ Municipal/City				☐ City		
\$	☐ Addition/Alteration			,		☐ Foundation		2	☐ (New) Sanitary Specify Type:				Well		
130000	Conversion							3	Sanitary (Exists) Specify Type						
	Relocate (existing bldg)									255.77	t) or 🗆 Vaulted (min 200 gallon)			on)	
			ness on			Use None		Portable (w/service contract)		ontract)					
		perty 611 Ba				Year Round			☐ Compost Toilet		oilet	j.			
		oil Do	an					□ None							
Existing Structure	e: (if pe	rmit beir	ng applied fo	r is relevant to it	) Le	ngth:			Width:			He	eight:		
Proposed Constru							4		Width:	30	)		eight:	14	
Proposed Us	e	1			Prop	osed Struc	ture					Dimensio	ns	Square	
			Daine in al	C1 / C							,	11-14-14		Footage	
				Structure (firs			:y)				(	X	)		
			Kesidenc	e (i.e. cabin, hu	inting shac	к, etc.)					(	X	)		
Rec'd for Issuance				with Loft								X	)		
til (and) r												X	)		
MAY 3 (	2018		with (2 <sup>nd</sup> ) Porch								- (	X	)		
2 4				with a Deck							(	X	)		
Secretarial Stat		1		with (2 <sup>nd</sup> ) D							-   (	X	. )		
Commercial	USE		with Attached Garage								(	Χ.	)		
$\square$ <b>Bunkhouse</b> w/ ( $\square$ sanitary, $\underline{or}$ $\square$ sleeping quarters, $\underline{or}$ $\square$ cooking & food prep facilities)								es) (	Х	)					
			Mobile Home (manufactured date)								(	Х	)		
☐ Municipal Use			Addition/Alteration (specify)							(	Х	)			
			Accessory	cessory Building (specify) Pole Bari								30 × 5	4)	1620	
			Accessory	Building Addi	ition/Alter						. (	Х	)		
Accessory Building Addition/Alteration (specify)															
Special Use: (explain)						1	Х	1							
<u> </u>			Special Use: (explain)								1	77.11	)	1000	
			Conditional Use: (explain)						- (	X	)				
			Other: (explain)								(	Х	)		
				OBTAIN A PERMIT											
I (we) declare that this a (are) responsible for the	pplication detail and	(including a accuracy of	ny accompanyin fall information	g information) has bee I (we) am (are) providi	en examined by ng and that it w	me (us) and to th ill be relied upon	e best of by Bavfie	my (our) knowle <b>Id County</b> in de	edge and belie termining whe	it is true, ther to iss	correct and o	omplete. I (we) further a	e) acknowled accept liability	ge that I (we) am y which may be a	
result of Bayfield County															

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application) Attach
Copy of Tax Statement Bayfield 54814 50. Courty If you recently purchased the property send your Recorded Deed

5-16-18

Date \_

Authorized Agent: \_

Address to send permit \_

34345

wbelow: Draw or Sketch your Property (regardless of what you are applying for) Show Location of: **Proposed Construction** Show / Indicate: North (N) on Plot Plan (3)Show Location of (\*): (\*) **Driveway** and (\*) **Frontage Road** (Name Frontage Road) (4) Show: All Existing Structures on your Property (5) Show: (\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P) Show any (\*): (6) (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond 1320 Show any (\*): (7)(\*) Wetlands; or (\*) Slopes over 20% DY Please complete (1) – (7) above (prior to continuing) Changes in plans must be approved by the Planning & Z (8) Setbacks: (measured to the closest point)

Measurement			Description	Measurement	
120 Feet			Setback from the <b>Lake</b> (ordinary high-water mark)	Feet	
Feet			Setback from the River, Stream, Creek	Feet	
			Setback from the Bank or Bluff	Feet	
87	Feet				
1203	1203 Feet Setback from Wetland		Setback from Wetland	Feet	
220	Feet		20% Slope Area on the property	☐ Yes ☐ No	
386	Feet		Elevation of Floodplain	Feet	
150	Feet		Setback to Well	140 Feet	
300	Feet			, , , ,	
	Feet				
	120 87 1203 220 386	120   Feet   Feet	120   Feet   Feet	120   Feet   Setback from the Lake (ordinary high-water mark)	

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

	, 0, 1	caciai agencies may a	io i o qui o permitor	1.				
Issuance Information (County Use Only)	Sanitary Number:	5642	# of bedrooms:	Sanitary Date:				
Permit Denied (Date):	Reason for Denial:							
Permit #: 18-0157	Permit Date: 5-3	1-18						
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming  □ Yes (Deed of Recor □ Yes (Fused/Contigue) □ Yes	ious Lot(s)) 🔀 No	Mitigation Required Mitigation Attached		Affidavit Required Affidavit Attached				
Granted by Variance (B.O.A.)  Previously Granted by Variance (B.O.A.)  Ves No Case #: Case #:								
	States		es Represented by Owner Was Property Surveyed	Yes				
appears cole compliant.	es repres	sove Lu	ferm!t-	Zoning District ( 4.6.3 ) Lakes Classification ( - )				
Date of Inspection: 5 21 2018	Inspected by:	but Sch	irman	Date of Re-Inspection:				
Condition(s): Town, Committee or Board Conditions Attached? Yes No – (If No they need to be attached.)  No – (If No they need to be attached.)  Signature of Inspector:  Date of Approval: 724/19								
Hold For Sanitary:  Hold For TBA:	Hold For Affic	davit: 🗌	Hold For Fees:					

## √illage, State or Federal y Also Be Required

AND USE - X SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

## **BAYFIELD COUNTY** PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

Steven Leafblad Issued To: 18-0157 No. **Bayfield** Town of W. Par in W 1/2 of Range 4 N. **50** Township 22 Section NW 1/4 1/4 of NE Location: CSM# Subdivision Block Lot Gov't Lot

For: Residential Accessory Structure: [ 1- Story; Pole Barn (30' x 54') = 1,620 sq. ft. ]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Not to be used for human habitation.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete. This permit may be void or revoked if any performance conditions are not

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completed or if any prohibitory conditions are violated.

## **Rob Schierman**

**Authorized Issuing Official** 

May 31, 2018

Date